# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 1 of 54 United States Bankruptcy Court District of Puerto Rico, San Juan Division

IN RE:		Case No.
MERCADO, JOSE ANGEL RIVERA		Chapter 13
	Debtor(s)	
	VERIFICATION OF CREDITOR MATR	IX
The above named debtor(s) hereby ve	rify(ies) that the attached matrix listing creditors	s is true to the best of my(our) knowledge.
Date: <b>January 10, 2020</b>	Signature: /s/ JOSE ANGEL RIVERA MERCAD	o
	JOSE ANGEL RIVERA MERCADO	Debtor
Date:	Signature:	
		Joint Debtor, if any

BANCO POPULAR DE PR PO Box 71375 San Juan, PR 00936-8475

DEPARTMENT OF TREASURE PO Box 9024140 San Juan, PR 00902-4140

INTERNAL REVENUE SERVICES PO BOX 80110 Cincinnati, OH 45201-0110

SCOTIABANK DE PR PO Box 362230 San Juan, PR 00936-2230

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# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 3 of 54 United States Bankruptcy Court District of Puerto Rico, San Juan Division

IN RE:	Case No Chapter <b>13</b>			
MERCADO, JOSE ANGEL RIVERA				
Debtor(s)	•			
BUSINESS INCOME AND EXPENSE	ES			
FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (Note: ONLY INCLUD operation.)	E informa	ation directly re	lated to	the business
PART A - GROSS BUSINESS INCOME FOR THE PREVIOUS 12 MONTHS:				
1. Gross Income For 12 Months Prior to Filing:	\$	112,356.00		
PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:				
2. Gross Monthly Income:			\$	9,363.00
PART C - ESTIMATED FUTURE MONTHLY EXPENSES:				
<ol> <li>Net Employee Payroll (Other Than Debtor)</li> <li>Payroll Taxes</li> <li>Unemployment Taxes</li> <li>Worker's Compensation</li> <li>Other Taxes</li> <li>Inventory Purchases (Including raw materials)</li> <li>Purchase of Feed/Fertilizer/Seed/Spray</li> <li>Rent (Other than debtor's principal residence)</li> <li>Utilities</li> <li>Office Expenses and Supplies</li> <li>Repairs and Maintenance</li> <li>Vehicle Expenses</li> <li>Travel and Entertainment</li> <li>Equipment Rental and Leases</li> <li>Legal/Accounting/Other Professional Fees</li> <li>Insurance</li> <li>Employee Benefits (e.g., pension, medical, etc.)</li> <li>Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition Business Debts (Specify):</li> </ol>	\$ \$	1,200.00 813.00 50.00 1,200.00 500.00 860.00 70.00 250.00 920.00		
21. Other (Specify):	\$			
22. Total Monthly Expenses (Add items 3-21)			\$	5,863.00
PART D - ESTIMATED AVERAGE <u>NET</u> MONTHLY INCOME				
23. AVERAGE NET MONTHLY INCOME (Subtract Item 22 from Item 2)			\$	3,500.00

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B201B (Form 201B) (12/09) Document Page 4 of 54

### United States Bankruptcy Court District of Puerto Rico, San Juan Division

Desc: Main

IN RE:	Case No
MERCADO, JOSE ANGEL RIVERA	Chapter 13
Debtor(s)	<b>,</b>

	NOTICE TO CONSUMER DEBTOR(S) OF THE BANKRUPTCY CODE	
Certificate of [Non-A	ttorney] Bankruptcy Petition Preparer	
I, the [non-attorney] bankruptcy petition preparer signing notice, as required by § 342(b) of the Bankruptcy Code.	the debtor's petition, hereby certify that I delivered to the de	btor the attached
Printed Name and title, if any, of Bankruptcy Petition Pred Address:	petition preparer is not an the Social Security numbe principal, responsible pers the bankruptcy petition pre	individual, state r of the officer, son, or partner of eparer.)
X	(Required by 11 U.S.C. §	110.)
partner whose Social Security number is provided above.		
Cer	tificate of the Debtor	
I (We), the debtor(s), affirm that I (we) have received and	read the attached notice, as required by § 342(b) of the Band	kruptcy Code.
MERCADO, JOSE ANGEL RIVERA	X /s/ JOSE ANGEL RIVERA MERCADO	1/10/2020
Printed Name(s) of Debtor(s)	Signature of Debtor	Date
Case No. (if known)	X	
	Signature of Joint Debtor (if any)	Date

Instructions: Attach a copy of Form B 201A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF PUERTO RICO, SAN JUAN DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

### Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint* case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	JOSE ANGEL First name  RIVERA  Middle name	First name  Middle name
	Bring your picture identification to your meetin with the trustee.	MERCADO	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1092	

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Debtor 1 MERCADO, JOSE ANGEL RIVERA

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs.  Business name(s)  EINs	☐ I have not used any business name or EINs.  Business name(s)  EINs
5.	Where you live		If Debtor 2 lives at a different address:
		Number, Street, City, State & ZIP Code  San Juan  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  PO Box 10097  San Juan, PR 00922-0097  Number, P.O. Box, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code  County  If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1 MERCADO, JOSE ANGEL RIVERA

Case number (if known)

Par									
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.							
	choosing to file under  ☐ Chapter 7  ☐ Chapter 11								
		□с	hapter 12						
		<b>■</b> C	hapter 13						
8.	How you will pay the fee	•	I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a						
			I need to pay		If you choose	this option, sign a	nd attach the Application	on for Individuals to Pay The	
		_	· ·	nstallments (Official Form	•		(III. ( O) .	7.5.1	
			not required to your family siz	, waive your fee, and may	do so only if y ay the fee in in	our income is less stallments). If you	than 150% of the offic choose this option, you	r 7. By law, a judge may, but is cial poverty line that applies to u must fill out the <i>Application</i>	
9.	Have you filed for bankruptcy within the last 8 years?	□ No							
	,,,,,,		District	PUERTO RICO BANKRUPTCY COURT	When	4/24/16	Case number	16-03242	
				PUERTO RICO BANKRUPTCY	When	10/27/14		14-08799	
			District	COURT		10/2//14	Case number	14-00/33	
			District		When		Case number		
10.	Are any bankruptcy cases	■ No	) )						
	pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ Ye	es.						
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
			Debtor				Relationship to y	/ou	
			District		When		Case number, if	known	
11.	Do you rent your residence?	■ No	Go to li	ne 12.					
		□ Ye	es. Has you	ur landlord obtained an e	viction judgme	ent against you?			
				No. Go to line 12.					
				Yes. Fill out <i>Initial Statem</i> bankruptcy petition.	nent About an I	Eviction Judgmen	t Against You (Form 10	01A) and file it as part of this	

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Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (if known)

Par	Report About Any Bus	sinesses \	You Own	as a Sole Proprieto	or	
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Part 4.			
		☐ Yes.	Name	e and location of bus	siness	
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership,		Name	e of business, if any		
	or LLC.		Numb	per, Street, City, Sta	ata & ZID Coda	
	If you have more than one sole proprietorship, use a separate sheet and attach it		Num	ber, Street, Oity, Sta	ille & ZIF Gode	
	to this petition.		_		ox to describe your business:	
					ness (as defined in 11 U.S.C. § 101(27A))	
				-	Estate (as defined in 11 U.S.C. § 101(51B))	
				•	lefined in 11 U.S.C. § 101(53A))	
				•	er (as defined in 11 U.S.C. § 101(6))	
				None of the above		
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedule.				
	For a definition of small	■ No.	I am	not filing under Cha <sub>l</sub>	pter 11.	
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code		11, but I am NOT a small business debtor according to the definition in the Bankruptcy	
		☐ Yes.	I am f	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.	
Par	4: Report if You Own or	Have Any	Hazardo	us Property or Any	y Property That Needs Immediate Attention	
14.	Do you own or have any	■ No.				
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or	☐ Yes.	What is	the hazard?		
	safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?		
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?		
					Number, Street, City, State & Zip Code	

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Debtor 1 MERCADO, JOSE ANGEL RIVERA

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or makinç rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Case number (if known) Debtor 1 MERCADO, JOSE ANGEL RIVERA

	Answer These Question	•	<u> </u>				
16.	What kind of debts do you have?		Are your debts primarily consumindividual primarily for a personal, f			11 U.S.C.§ 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily busine for a business or investment or three				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that	at are not consumer deb	ots or business debts		
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapter 7. G	o to line 18.			
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you paid that funds will be available to			xcluded and administrative expenses are	
	administrative expenses		□ No				
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	<b>1</b> -49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		50,001-100,000	
		☐ 100-19 ☐ 200-99		☐ 10,001-25,000		☐ More than100,000	
	How much do you	<b>■</b> \$0 - \$5	50,000	<b>□</b> \$1,000,001 - \$10		□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	\$50,001 - \$100,000		□ \$10,000,001 - \$5 □ \$50,000,001 - \$1		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			01 - \$500,000 01 - \$1 million	☐ \$30,000,001 - \$1 ☐ \$100,000,001 - \$		☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$5	50,000	<b>□</b> \$1,000,001 - \$10		□ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?	\$50,001 - \$100,000		□ \$10,000,001 - \$5 □ \$50,000,001 - \$1		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			01 - \$500,000 01 - \$1 million	☐ \$100,000,001 - \$1 ☐ \$100,000,001 - \$		☐ More than \$50 billion	
Par	t7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.					
		I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ JOSE ANGEL RIVERA MERCADO					
		JOSE A	NGEL RIVERA MERCADO of Debtor 1		nature of Debtor 2		
		Executed		Exe	ecuted on		
			MM / DD / YYYY		MM / DD	/ YY <del>Y</del> Y	

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Debtor 1 MERCADO, JOSE ANGEL RIVERA

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ German A. Rieckehoff	Date	January 10, 2020
Signature of Attorney for Debtor		MM / DD / YYYY
German A. Rieckehoff		
Printed name		
Lcdo German Rieckehoff		
Firm name		
273 URUGUAY ST CENTRUM PLZ APT 5A		
San Juan, PR 00901		
Number, Street, City, State & ZIP Code		
Contact phone (787) 415-1453	Email address	grieckehoff@yahoo.com
(101) 410 1400	2a address	gricokerion @yarloo.com
217704		
Bar number & State		

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				Docum	ent Page 12 of 54	4	_	
	Fill in	this information to iden	tify your ca	se and this fil	ing:			
Dahta	- 4	LOOF ANOTH D	U/ED				9	
Debto	r i	JOSE ANGEL R First Name		Idle Name	Last Name		1	
Debto	r 2	riiotranio	IVIIC	idio Hamo	Edot Namo		ĺ	
	e, if filing)	First Name	Mic	Idle Name	Last Name			
	. 0	Development of Occupit Countilline	DICTRIC	T OF BUEDTO	DICO CAN ILIAN DIVICION	1	1	
United	s States i	Bankruptcy Court for the:	DISTRIC	T OF PUERTO	RICO, SAN JUAN DIVISION	<u> </u>	1	
Case	number							☐ Check if this is an
								amended filing
							_	-
<b>~</b> "		4004/5						
Offic	<u>cial F</u>	orm 106A/B						
Sch	hedi	ile A/B: Pro	nertv					12/15
					16 614- 1 41-		4 41 4 1:- 41	
think it informa	fits best.	Be as complete and accur ore space is needed, attacl	ate as possi	ble. If two marri	once. If an asset fits in more th ed people are filing together, bo rm. On the top of any additional	oth are equally resp	onsible for sup	plying correct
Part 1:	Descril	oe Each Residence, Buildin	ng, Land, or 0	Other Real Estat	e You Own or Have an Interest	In		
1. <b>Do</b> y	ou own o	r have any legal or equitab	le interest in	any residence,	building, land, or similar prope	rty?		
■ N	lo. Go to F	Part 2.						
_		e is the property?						
	es. Wilei	e is the property:						
Part 2:	Descri	oe Your Vehicles						
3. <b>Car</b> □ N ■ Y	lo	trucks, tractors, sport u	tility vehicl	es, motorcycl	es			
		Maraadaa Barr				Do not de	oduct secured als	ims or exemptions. Put
3.1	Make:	Mercedes-Benz		Who has an inte	erest in the property? Check one			d claims on Schedule D:
	Model:	CLK320		Debtor 1 only		Creditors	Who Have Clain	ns Secured by Property.
	Year:	2001		Debtor 2 only			alue of the	Current value of the
				Debtor 1 and		entire pro	operty?	portion you own?
г	Other inf	ormation:		☐ At least one of	of the debtors and another			
				Charle if this	. i		\$2,390.00	\$2,390.00
				(see instruction	is community property		<del>~_,~~</del>	ΨΞ,000.00
					<i>,</i>			
Exam  N Y  5 Add .you	mples: Bo	pats, trailers, motors, personats, p	onal watercr you own fo that numb	aft, fishing vess or all of your e er here	nal vehicles, other vehicles, sels, snowmobiles, motorcycle	accessories	ages	\$2,390.00
Do yo	u own o	r have any legal or equi	table intere	st in any of th	e following items?			Current value of the
							•	oortion you own? Oo not deduct secured

Official Form 106A/B Schedule A/B: Property page 1

claims or exemptions.

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D	Debtor 1 MERCADO,	Document Page 13 of 54  JOSE ANGEL RIVERA  Case number (a	if known)
6.	Household goods and fu Examples: Major applianc □ No ■ Yes. Describe	rnishings es, furniture, linens, china, kitchenware	
	— Tos. Dosoribu	ASSORTED HOUSEHOLD FURNITURE AND APPLIANCES WITH VARIOUS DEGREES OF DEPRECIATION; ESTIMATED AMOUNT; NOT APPRAISED.	\$5,000.00
7.		d radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mu phones, cameras, media players, games	usic collections; electronic devices
	Yes. Describe	TV SET	\$300.00
	collections, make No Yes. Describe  Equipment for sports and		
10	instruments ■ No □ Yes. Describe  D. Firearms Examples: Pistols, rifles,	raphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; car	ioes and kayaks, carpentry tools, musical
	■ No □ Yes. Describe		
11	□ No	hes, furs, leather coats, designer wear, shoes, accessories	
	Yes. Describe	MISCELLANEOUS ITEMS OF CLOTHING	\$500.00
12	2. <b>Jewelry</b> Examples: Everyday jewe □ No ■ Yes. Describe	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, ger	ns, gold, silver
	- res. Describe	WATCH, RING, CHAIN	\$1,000.00
13	3. Non-farm animals  Examples: Dogs, cats, b  No  ☐ Yes. Describe	irds, horses	
14	4. Any other personal and	household items you did not already list, including any health aids you did not	t list
	☐ Yes. Give specific info	rmation	

15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....

\$6,800.00

Part 4: Describe Your Financial Assets

Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Page 14 of 54 Document Case number (if known) Debtor 1 MERCADO, JOSE ANGEL RIVERA Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No ☐ Yes. 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... Coop de ahorro y credito oriental \$1,500.00 **Savings Account** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ■ No ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No

■ NO

☐ Yes. Give specific information about them...

26. Patents, copyrights, trademarks, trade secrets, and other intellectual property

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

■ No

Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Page 15 of 54 Document Debtor 1 Case number (if known) MERCADO, JOSE ANGEL RIVERA ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No The second secon 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information... 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for \$1,500.00 Part 4. Write that number here.....

Official Form 106A/B Schedule A/B: Property page 4

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

37. Do you own or have any legal or equitable interest in any business-related property?

■ No. Go to Part 6.□ Yes. Go to line 38.

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Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (if known) Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. Part 6: 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ...... \$0.00 Part 2: Total vehicles, line 5 \$2,390.00 57. Part 3: Total personal and household items, line 15 \$6,800.00 58. Part 4: Total financial assets, line 36 \$1,500.00 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$10,690.00 \$10,690.00

\$10,690.00

Official Form 106A/B Schedule A/B: Property page 5

Total of all property on Schedule A/B. Add line 55 + line 62

# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 17 of 54

Fill in th					
Debtor 1		VERA MERCADO	LastNama		
	First Name	Middle Name	Last Name	1	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF PUERTO RICO, SAN JUAN DIVISION			
Case number					
(if known)					Check if this is an
					amended filing
					G

### Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Pro	perty You (	Claim as Exem <sub>l</sub>	ρt
---------	------------------	-------------	----------------------------	----

1.	. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.				
	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)				
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)				

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Mercedes-Benz CLK320	\$2,390.00			11 USC § 522(d)(2)
2001 180000 Line from <i>Schedule A/B</i> : 3.1			100% of fair market value, up to any applicable statutory limit	
ASSORTED HOUSEHOLD	\$5,000.00			11 USC § 522(d)(3)
FURNITURE AND APPLIANCES WITH VARIOUS DEGREES OF DEPRECIATION; ESTIMATED AMOUNT; NOT APPRAISED. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
TV SET	\$300.00			11 USC § 522(d)(5)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
MISCELLANEOUS ITEMS OF CLOTHING	\$500.00			11 USC § 522(d)(5)
Line from Schedule A/B: 11.1			100% of fair market value, up to any applicable statutory limit	
WATCH, RING, CHAIN	\$1,000.00			11 USC § 522(d)(5)
Line from Schedule A/B: 12.1			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 18 of 54

	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Check only one box for each exemption.				
	Coop de ahorro y credito oriental Line from Schedule A/B 17.1	\$1,500.00	<b>-</b>	11 USC § 522(d)(5)			
	Line from Scriedule A/B. 17.1		■ 100% of fair market value, up to any applicable statutory limit				
3.	<ol> <li>Are you claiming a homestead exemption of more than \$170,350?         (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)     </li> </ol>						
	■ No						
	Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?						
	□ No						
	☐ Yes						

# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 19 of 54

Fill in th				
Debtor 1	JOSE ANGEL RIV	/ERA MERCADO		
	First Name	Middle Name	Last Name	]
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF PUERTO RICO, SAN JUAN DIVISION		
Case number (if known)				☐ Check if this is an amended filing

### Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below.

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		Docume	ent Page 20 oi	54			
Fill in this inf	ormation to identify your	case:					
Debtor 1	JOSE ANGEL RIVE	RA MERCADO					
	First Name	Middle Name	Last Name				
Debtor 2	First Name	Middle None	Lost Nome		1		
(Spouse if, filing)	First Name	Middle Name	Last Name				
United States Ba	ankruptcy Court for the:	DISTRICT OF PUERTO	O RICO, SAN JUAN DIVI	SION	1		
Case number							
(if known)						Check if t	this is an
						amended	l filing
Official Forr	m 106F/F						
	F/F: Creditors Wh	o Have Unsec	ured Claims				12/15
	d accurate as possible. Use			for craditors with NONI	DIODITY A	laime Liet t	
	Have Claims Secured by Prop Page to this page. If you have nown).						
	II of Your PRIORITY Unse						
	ors have priority unsecured	claims against you?					
□ No. Go to F ■ Yes.	Part 2.						
identify what ty possible, list th	r priority unsecured claims.  pe of claim it is. If a claim has  claims in alphabetical order  one creditor holds a particular	both priority and nonpriority according to the creditor 's	amounts, list that claim here name. If you have more than	e and show both priority a	nd nonpriorit	y amounts. A	As much as
(For an explan	ation of each type of claim, see	e the instructions for this for	m in the instruction booklet.)	Total claim	Priority amount		lonpriority mount
2.1 <b>DEPAR</b>	RTMENT OF TREASUR	E Last 4 digits of	f account number	\$50,000.00		\$1.00	\$49,999.00
Priority C	reditor's Name	When was the	debt incurred?				
San Ju	x 9024140 lan, PR 00902-4140 Street City State Zip Code		you file, the claim is: Chec	ck all that apply	-		
Who incurre	ed the debt? Check one.	☐ Contingent					
Debtor 1	only	☐ Unliquidate	d				
Debtor 2	only	□ Disputed					
Debtor 1	and Debtor 2 only	*	RITY unsecured claim:				
_	ne of the debtors and another	☐ Domestic s	upport obligations				
_	this claim is for a communit	<u> </u>					
	subject to offset?	<u> </u>	death or personal injury while				
■ No	•	☐ Other. Spec		-			
☐ Yes		_ 2 311 000					

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Debt	or 1 MERCADO, JOSE ANGEL RIVER	Case	number (f known)		
2.2	INTERNAL REVENUE SERVICES	Last 4 digits of account number	\$15,000.00	\$1.00	\$14,999.00
,	Priority Creditor's Name	When was the debt incurred?			
	PO BOX 80110	when was the dept incurred:			
	Cincinnati, OH 45201-0110				
	Number Street City State Zip Code	As of the date you file, the claim is: Check a	all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	Debtor 1 only	☐ Unliquidated			
	Debtor 2 only	☐ Disputed			
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations			
	☐ Check if this claim is for a community debt	■ Taxes and certain other debts you owe the	government		
	Is the claim subject to offset?	Claims for death or personal injury while yo	ou were intoxicated		
	■ No	☐ Other. Specify			
	Yes				
<b>4.</b> L	■ No. You have nothing to report in this part. Submit  Yes.  List all of your nonpriority unsecured claims in the insecured claim, list the creditor separately for each contain one creditor holds a particular claim, list the other	alphabetical order of the creditor who holds aim. For each claim listed, identify what type of c	claim it is. Do not list claims alrea	dy included in F	Part 1. If more
_				Total o	laim
4.1	BANCO POPULAR DE PR	Last 4 digits of account number			\$0.00
	Nonpriority Creditor's Name				75355
	DO Dov 74275	When was the debt incurred?			
	PO Box 71375 San Juan, PR 00936-8475				
	Number Street City State Zip Code	As of the date you file, the claim is: Chec	ck all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim	:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation a report as priority claims	agreement or divorce that you did	d not	
	■ No	☐ Debts to pension or profit-sharing plans	, and other similar debts		

☐ Yes

Other. Specify

# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main

Document Page 22 of 54 Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (f known)

SCOTIABANK DE PR	Last 4 digits of account number	
Nonpriority Creditor's Name		
	When was the debt incurred?	
PO Box 362230		
San Juan, PR 00936-2230		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□Yes	Other. Specify	

### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

### Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 65,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 65,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims from Part 2	6g.	Obligations arising out of a separation agreement or divorce that		
Holli Part 2	og.	you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 0.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 0.00

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Fill in th	his information to identi	y your case:			
Debtor 1	JOSE ANGEL RIV	VERA MERCADO			
	First Name	Middle Name	Last Name	)	
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF PUERTO	RICO, SAN JUAN DIVISION		
Case number					☐ Check if this is a
					amended filing

### Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the , Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1			. , ,,		
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					<u></u>
	Name				
	Number	Street			<del></del>
	City		State	ZIP Code	<u> </u>
2.3	Oity		Otate	Zii Code	
2.0	Name				
	Number	Street			<del></del>
	City		State	ZIP Code	<del></del>
2.4	Oity		Olalo	211 0000	
	Name				_
	Number	Street			<u> </u>
	City		04-4-	710.0-1-	<u> </u>
2.5	City		State	ZIP Code	
2.0	Name				<del></del>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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		Docume	ili raye 24 U	1 34	
Fil	I in this information to identi	y your case:			
Debtor 1	JOSE ANGEL RI	VERA MERCADO			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	ng) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for the:	DISTRICT OF PUERTO	RICO, SAN JUAN DIVI	SION	
Case numb	per				☐ Check if this is an
					amended filing
Official	Form 106H				
Sched	ule H: Your Cod	ebtors			12/15
are filing to and numbe case numbe	ogether, both are equally respective the entries in the boxes on er (if known). Answer every o	onsible for supplying co the left. Attach the Additi juestion.	rrect information. If mo onal Page to this page.	ore space is needed, co or the top of any Add	as possible. If two married people py the Additional Page, fill it out, itional Pages, write your name and
1. ро у	you have any codebtors? (If y	ou are filing a joint case, do	o not list either spouse as	a codeptor.	
■ No □ Yes					
	nin the last 8 years, have you nia, Idaho, Louisiana, Nevada,				states and territories include Arizona,
_	Go to line 3.  Did your spouse, former spous	se, or legal equivalent live w	rith you at the time?		
line 2 a	again as a codebtor only if th Schedule E/F (Official Form	at person is a guarantor	or cosigner. Make sure	you have listed the cre	vith you. List the person shown in editor on Schedule D (Official Form e E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State and 2	IP Code		Column 2: The cred Check all schedules	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, lin	
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, line	<u> </u>
	Name			☐ Schedule E/F, line ☐ Schedule G, line	ne
	Number Street	State	7IP Code	_	

Official Form 106H Software Copyright (c) 2020 CINGroup - www.cincompass.com Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 25 of 54

EIII	in this information to identify your so					ı				
	in this information to identify your ca		^							
De	JOSE ANGE	L RIVERA MERCAD	0		_					
_	btor 2				_					
Uni	ited States Bankruptcy Court for the:	DISTRICT OF PUER DIVISION	TO RICO, SAN JUA	N	_					
Ca	se number					Check i	if this is:			
(lf kı	nown)		_			1	amende	J		
_								nt showing f the follov	g postpetition over the state of the state o	chapter 13
<u>O</u>	fficial Form 106I					MM	1 / DD/ Y	YYY		
S	chedule I: Your Inco	me								12/15
spo atta	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O	spouse is not filing wit	h you, do not inclu	de informa	atior	າ about yoເ	ur spous	se. If more	e space is ne	eded,
1.	Fill in your employment information.		Debtor 1				Debtor 2	or non-fil	ling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Emplo	yed		
	attach a separate page with information about additional employers.	Employment status	☐ Not employed			Г	□ Not er	mployed		
		Occupation	-							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	here?							
Pai	rt 2: Give Details About Mont	thly Income								
unle If yo	mate monthly income as of the dates you are separated.  ou or your non-filing spouse have more ce, attach a separate sheet to this form	than one employer, com	· ·		•		•		•	
						For Debto	or 1		otor 2 or ng spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$		0.00	\$	N/A	
3.	Estimate and list monthly overting	ne pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$	0	.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 26 of 54

5a. Tax, Medicare, and Social Security deductions  5b. Mandatory contributions for retirement plans  5b. \$ 0.000 \$ N/A  N/A  5c. Voluntary contributions for retirement plans  5c. Voluntary contributions for velocities of the form line 4.  7c. Voluntary contributions for Voluntary contributions for the form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  7c. Voluntary contributions for velocities of form line 4.  8c. Voluntary contributions for velocities of veloci	Debtor 1	MERCADO, JOSE ANGEL RIVERA	_	Case r	number (if known)		
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8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  8d. Unemployment compensation  8d. \$ 0.00 \$ N/A  8e. Social Security  8e. \$ 0.00 \$ N/A  8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  8f. \$ 0.00 \$ N/A  8g. Pension or retirement income  8g. \$ 0.00 \$ N/A  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A  Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 3,500.00 \$ N/A  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  1. State all other regular contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ (Combined monthly income.  Write that amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Obeyou expect an increase or decrease within the year after you file this form?	8b.	Interest and dividends	8b.	\$		\$	
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8e. Social Security 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A  8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$ 3,500.00 \$ N/A  Add all other income. Add lines 7 + line 9.  10. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$ 3,500 Combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  15. \$ 3,500 Combined monthly income.  16. \$ 3,500 Combined monthly income.  17. \$ 3,500 Combined monthly income.  18. \$ 0.00 \$ N/A  8. \$ 0.00 \$ N/A  9. \$ 3,5	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  8g. Pension or retirement income  8h. Other monthly income. Specify:  8h. \$ 0.00 \$ N/A  8h	8e.	Social Security	8e.	\$	0.00	\$	
8g. Pension or retirement income 8h. Other monthly income. Specify: 8h. Other monthly income. Specify: 8h. Other monthly income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. \$\frac{3,500.00}{3,500.00} + \\$\frac{N/A}{3,500.00} \\$  N/A  Add all other income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$\frac{3,500}{2,000}\$  Combined monthly income.  No.	8f.	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8f.	\$	0.00	\$	N/A
8h. Other monthly income. Specify:  Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  9. \$\frac{3,500.00}{3,500.00}\$ \$\frac{N/A}{A}\$  Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$\frac{3,500}{2,000}\$  Combined monthly income.  No.	8g.	Pension or retirement income	— 8g.	\$			
Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$  (2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. Combined monthly income.  No.	8h.	Other monthly income. Specify:		\$		+ \$	
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filling spouse.  State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$  4. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  Do you expect an increase or decrease within the year after you file this form?  No.	). Add	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	3,500.00	\$	N/A
1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$  2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies  12. \$  3,500  Combined monthly incomes. No.		•	10. \$	3	<b>5,500.00</b> + \$_	N/A	3,500.00
Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly incompared to the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. Combined monthly incompared to the Summary of Schedules and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data, if it applies 12. Summary of Certain Liabilities and Related Data (Certain Liabilities and Related Data) and Related Data (Certain Liabilities and Related Data (Certain Liabilities and Related Data (Certain Liabilities and Related	1. Sta Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your der friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not av	ependen			Schedule J.	. +\$ 0.00
monthly incomposed an increase or decrease within the year after you file this form?  No.							
	3. <b>Do</b>	•	?				Combined monthly income
Yes. Explain:		Yes. Explain:					

Official Form 106l Schedule I: Your Income page 2

# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 27 of 54

Fill	n this information to identify you	ır case:				
Deb	tor 1 IOSE ANGEL	RIVERA MERCADO		Check	c if this is:	
	JOSE ANGLE	- RIVERA MERCADO			An amended filing	
Deb						ing postpetition chapter 13
(Spc	ouse, if filing)			6	expenses as of the t	following date:
Unite	ed States Bankruptcy Court for the:	DISTRICT OF PUERTO RICO, SA DIVISION	AN JUAN	7	MM / DD / YYYY	
	e number nown)					
	ficial Form 106J					
Sc	chedule J: Your E	xpenses				12/15
info	rmation. If more space is need nown). Answer every question					
1.	Is this a joint case?					
	■ No. Go to line 2. □ Yes. <b>Does Debtor 2 live in</b>	a separate household?				
	□ No	"In Official Form 400 LO Formand	( O		0	
	☐ Yes. Debtor 2 must	file Official Form 106J-2, Expenses t	or Separate Housend	plaof Debtor	2.	
2.	Do you have dependents?	No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes
						□ No
						☐ Yes ☐ No
						☐ Yes
						□ No
						☐ Yes
3.	Do your expenses include expenses of people other that yourself and your dependent	ts? □ Yes				
Par		g Monthly Expenses ur bankruptcy filing date unless yo	ou are using this for	m as a sunn	lement in a Chant	er 13 case to report
ехр		inkruptcy is filed. If this is a supple				
valu	•	on-cash government assistance if ye included it on Schedule I: Your I			Your expe	enses
(011	iciai i ciiii i coi.j					
4.	The rental or home ownership payments and any rent for the g	ip expenses for your residence. Inc ground or lot.	clude first mortgage	4. \$		951.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's, o	or renter's insurance		4b. \$		0.00
	4c. Home maintenance, rep	pair, and upkeep expenses		4c. \$		0.00
_	4d. Homeowner's associatio			4d. \$		0.00
5	Additional mortgage naymen	<b>ste for vour regidence</b> , such as hom	an agusty lagge	5 C		0.00

ebtor 1	MERCADO, JOSE ANGEL RIVERA	Case number	er (if known)	
. Utili	ties:			
6a.	Electricity, heat, natural gas	6a. S	\$	150.00
6b.	Water, sewer, garbage collection	6b. \$	<u> </u>	50.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. S		175.00
6d.	Other. Specify:	6d. S	·	0.00
	d and housekeeping supplies	7. S	·	
			·	325.00
	dcare and children's education costs	8. 3	·	0.00
	hing, laundry, and dry cleaning	9. \$	·	99.00
	sonal care products and services	10. \$	·	0.00
Med	lical and dental expenses	11. \$	<b>.</b>	60.00
	nsportation. Include gas, maintenance, bus or train fare.			200.00
	not include car payments.	12. \$	·	200.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13. \$	·	0.00
. Cha	ritable contributions and religious donations	14. \$	5	0.00
. Insu	irance.			
Do r	not include insurance deducted from your pay or included in lines 4 or 20.			
15a.	Life insurance	15a. S	<b>5</b>	0.00
15b	Health insurance	15b. 3	\$	100.00
15c.	Vehicle insurance	15c. \$	\$	0.00
	Other insurance. Specify:	15d.		0.00
	es. Do not include taxes deducted from your pay or included in lines 4 or 20.			0.00
Spe		16. \$	8	0.00
	allment or lease payments:		·	0.00
	Car payments for Vehicle 1	17a. S	ž.	0.00
			·	0.00
	Car payments for Vehicle 2	17b. \$	·	0.00
	Other. Specify:	17c. S	·	0.00
	Other. Specify:	17d. S	§	0.00
	r payments of alimony, maintenance, and support that you did not repo			0.00
ded	ucted from your pay on line 5, Schedule I, Your Income (Official Form 1			
. Oth	er payments you make to support others who do not live with you.		<b></b>	0.00
Spe	·	19.		
	er real property expenses not included in lines 4 or 5 of this form or on			
20a.	Mortgages on other property	20a. S	§	0.00
20b	Real estate taxes	20b. S		0.00
20c.	Property, homeowner's, or renter's insurance	20c.	\$	0.00
20d	Maintenance, repair, and upkeep expenses	20d.	<u> </u>	0.00
	Homeowner's association or condominium dues	20e. S	·	0.00
	er: Specify: meals at work	21.	·	110.00
			*	
	icule registration fee		+\$	17.00
veh	icule maintenances		+\$	50.00
Cald	culate your monthly expenses			
	Add lines 4 through 21.		\$	2,287.00
	•	61-2	\$	2,201.00
	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 10	00-2	· <del></del>	
22c.	Add line 22a and 22b. The result is your monthly expenses.		\$	2,287.00
Cald	culate your monthly net income.	L		
	Copy line 12 (your combined monthly income) from Schedule I.	23a. S	\$	3,500.00
	Copy your monthly expenses from line 22c above.	23b. ·		
230	Copy your monthly expenses normine 220 above.	۷۵۵	Ψ	2,287.00
23c	Subtract your monthly expenses from your monthly income.			
_00.	The result is your <i>monthly net income</i> .	23c.	\$	1,213.00
_	•			
	you expect an increase or decrease in your expenses within the year aft			
	example, do you expect to finish paying for your car loan within the year or do you experient to the terms of your mortgage?	ect your mortgage pa	yment to increase of	or decrease because of a
_	fication to the terms of your mortgage?			
<b>I</b>	lo.			
	'es. Explain here:	· · · · · · · · · · · · · · · · · · ·		

Fill in this in	formation to identify ye	our case.			
Debtor 1		VERA MERCADO			
	First Name	Middle Name	Last Name	<del></del> }	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	nkruptcy Court for the:	DISTRICT OF PUERTO	O RICO, SAN JUAN DIVISION		
Case number					
(if known)					☐ Check if this is an amended filing
f two married pe	ople are filing together	, both are equally respor	I Debtor's Schoosible for supplying correct in or amended schedules. Making ruptcy case can result in fine	nformation.	
, 	8 U.S.C. §§ 152, 1341, 19	519, and 3571.			
Did you pay	y or agree to pay some	one who is NOT an attor	ney to help you fill out bankru	uptcy forms?	
■ No					
☐ Yes. N	Name of person				y Petition Preparer's Notice, Signature (Official Form 119)
•	ity of perjury, I declare etrue and correct.	that I have read the sum	mary and schedules filed with	n this declaration and	
X /s/ JOS	SE ANGEL RIVERA I	MERCADO	X		
JOSE A	ANGEL RIVERA MEI re of Debtor 1		Signature of Deb	tor 2	
Date .	January 10, 2020		Date		

# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 30 of 54

Fill in th	is information to identi	fy your case:	· ·	
Debtor 1	JOSE ANGEL RIV	/ERA MERCADO		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	nkruptcy Court for the:	DISTRICT OF PUERTO	RICO, SAN JUAN DIVISION	
Case number _				☐ Check if this is an
(				amended filing

### Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	r original forms, you must fill out a new Summary and check the box at the top of this page.		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	10,690.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	10,690.00
Pa	rt 2: Summarize Your Liabilities		
			liabilities unt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	65,000.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j &chedule E/F	\$	0.00
	Your total liabilities	\$	65,000.00
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$	3,500.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,287.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other.	ner sched	dules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C.§ 159.	rsonal, f	amily, or household

Official Form 106Sum

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the

court with your other schedules.

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Debtor 1 MERCADO, JOSE ANGEL RIVERA

Case number (if known)

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_4,313.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	65,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
<ol> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)</li> </ol>	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	65,000.00

# Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 32 of 54

	Fill in t	his information to ident	ify your case:				
De	btor 1	JOSE ANGEL R	IVERA MERCADO				
		First Name	Middle Name		ast Name		
1 -	btor 2 ouse if, filing)	First Name	Middle Name		ast Name		
`							
Un	ited States i	Bankruptcy Court for the:	DISTRICT OF PUERTO	RICO, S.	AN JUAN DIVISION		
	se number nown)						☐ Check if this is an
							amended filing
~	··· · · -	407					
		orm 107			( -		
St	atemer_	nt of Financial	Affairs for Individ	duals	Filing for E	sankruptcy	4/19
			ole. If two married people ar				upplying correct our name and case number
		wer every question.	attaon a coparato oncot to t		on the top of any	additional pages, mile y	our name and odes names.
Pa	rt 1: Give	e Details About Your Ma	rital Status and Where You	Lived B	efore		
1.	What is yo	our current marital statu	s?				
	☐ Marri	ad					
	_	eu narried					
2	During the	a last 2 years, have yeu	lived environment ether then		live new?		
2.	During the	e last 3 years, have you	lived anywhere other than v	wnere yo	u live now?		
	■ No						
	☐ Yes. I	List all of the places you liv	ved in the last 3 years. Do not	include v	here you live now.		
	Debtor 1	Prior Address:	Dates Debtor 1 there	lived	Debtor 2 Prior Ad	ldress:	Dates Debtor 2 lived there
3.	Within the	last 8 years, did you ev	ver live with a spouse or leg	al equiv	alent in a communi	ty property state or territ	tory? (Community property
			ifornia, Idaho, Louisiana, Nev				
	■ No						
	☐ Yes. I	Make sure you fill out Sch	edule H: Your Codebtors (Offi	icial Forn	106H).		
Pai	rt 2 Exp	lain the Sources of You	r Income				
4.	Did you b	ave any income from en	nployment or from operating	a a bueii	ace during this vo	ar or the two previous ca	alandar vaare?
7.	Fill in the to	otal amount of income yo	u received from all jobs and a nave income that you receive to	all busine	sses, including part-	time activities.	neman years:
	■ No						
		Fill in the details.					
			Debtor 1			Debtor 2	
			Sources of income	Gros	s income	Sources of income	Gross income
			Check all that apply.	(befo	re deductions and sions)	Check all that apply.	(before deductions and exclusions)

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Debtor 1	MERC	CADO, JOSE ANG	Document EL RIVERA		e number (if known)	
Incli othe you	ude incomer public be are filing a each sour	e regardless of whethe enefit payments; pension a joint case and you ha	e during this year or the two per that income is taxable. Examplons; rental income; interest; divide income that you received togethe from each source separately.	les of other income are alim- dends; money collected from ether, list it only once under I	n lawsuits; royalties; and gaml Debtor 1.	
			Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
Part 3:	either De No. Ne ind Du	btor 1's or Debtor 2's either Debtor 1 nor D dividual primarily for a p uring the 90 days befor No. Go to line 7 Yes List below e creditor. Do payments to	Made Before You Filed for Bass debts primarily consumer debtor 2 has primarily consumer deptor 2 has primarily consumers on all family, or household property of the you filed for bankruptcy, did you an attorney for this bankruptcy on 4/01/22 and every 3 years af	ebts? ner debts. Consumer debts urpose."  ou pay any creditor a total of total of \$6,825* or more in cestic support obligations, su case.	\$6,825* or more?  one or more payments and the ich as child support and alim	e total amount you paid that

this bankruptcy case.

Creditor's Name and Address

Dates of payment

Total amount

Amount you

Was this payment for ...

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for

paid

still owe

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

No.

☐ Yes

Insider's Name and Address

Dates of payment

Total amount paid

Amount you still owe

8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?

Include payments on debts guaranteed or cosigned by an insider.

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

Go to line 7.

No

Yes. List all payments to an insider

Insider's Name and Address

Dates of payment

Total amount
paid

Amount you
still owe
Include creditor's name

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?
List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications,

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Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (if known)

	and contract disputes.								
	■ No □ Yes. Fill in the details.								
	Case title Case number	Nature of the case	Court or agency	Status of the	e case				
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.								
	<ul><li>No. Go to line 11.</li><li>Yes. Fill in the information below.</li></ul>								
	Creditor Name and Address	Describe the Property		Date	Value of the property				
		Explain what happened							
11.	Within 90 days before you filed for bankrup accounts or refuse to make a payment bec.  No Yes. Fill in the details.		uding a bank or financial insti	tution, set off any am	ounts from your				
	Creditor Name and Address	Date action was taken	Amount						
12.	Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?								
	■ No □ Yes								
Par	5: List Certain Gifts and Contributions								
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  ■ No								
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600	per Describe the gifts		Dates you gave	Value				
	person	<b>3</b> 11 <b>3</b> 11 <b>3</b> 11		the gifts					
	Person to Whom You Gave the Gift and Address:								
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?  ■ No □ Yes. Fill in the details for each gift or contribution.								
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)								
Par	6: List Certain Losses								
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?								
	■ No								
	how the loss occurred	Describe any insurance connected the amount that insurance claims on line 33 consurance consura	rance has paid. List pending	Date of your loss	Value of property lost				
Par	List Cartain Boymonts or Transfers								

Part 7: List Certain Payments or Transfers

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

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Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (if known)

	consulted about seeking bankruptcy or preparing a bankruptcy petition?								
	Include any attorneys, bankruptcy petition prepa	rers,	or credit counseling a	gencies for serv	ices re	quired in	your bankruptcy.		
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You		Description and value of any property transferred				Date payment or transfer was made		Amount of payment
	LCDO GERMAN RIECKEHOFF 273 URUGUAY ST San Juan, PR 00901								\$1,300.00
17.	promised to help you deal with your credito	ithin 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who omised to help you deal with your creditors or to make payments to your creditors? on to include any payment or transfer that you listed on line 16.							
	■ No □ Yes. Fill in the details.								
	Person Who Was Paid Address		Description and vertransferred	Description and value of any property transferred			Date payment or transfer was made		Amount of payment
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.								
	Person Who Received Transfer Address		property transferred paymen		ayment	be any property or Date nts received or debts made exchange		ite transfer was ade	
	Person's relationship to you				•		90		
<ul> <li>19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar debeneficiary? (These are often called asset-protection devices.)</li> <li>■ No</li> <li>□ Yes. Fill in the details.</li> </ul>						ıst or similar device o	f whi	ch you are a	
	Name of trust		Description and value of the property transferred					te Transfer was	
Par	t 8: List of Certain Financial Accounts, Ins	strum	nents, Safe Deposit I	Boxes, and Sto	rage U	Inits			
20.	Within 1 year before you filed for bankruptc sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association No	r oth	er financial account	s; certificates	of dep				,
	Name of Financial Institution and La				c m			et balance before osing or transfer	
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?								
	■ No □ Yes. Fill in the details.								
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had accommoder, Stand ZIP Code)		Desc	ribe the	contents		Do you still have it?

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Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (if known)

22.	Have you stored property in a storage unit or p	lace other than your home within 1 y	rear before you filed for bankruptcy?							
	■ No									
	Yes. Fill in the details.									
	Name of Storage Facility	Who else has or had access	Describe the contents	Do you still						
	Address (Number, Street, City, State and ZIP Code)	to it?	bescribe the contents	have it?						
		Address (Number, Street, City, State and ZIP Code)								
	A Libertife Brownerte Vereillell an Occated for	,								
Par	9: Identify Property You Hold or Control for	Someone Else								
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.									
	■ No									
	☐ Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Par	10: Give Details About Environmental Inform	ation								
For	he purpose of Part 10, the following definitions	apply:								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.									
	Site means any location, facility, or property as own, operate, or utilize it, including disposal sit	-	w, whether you now own, operate, or	utilize it or used to						
	Hazardous material means anything an environ material, pollutant, contaminant, or similar term		vaste, hazardous substance, toxic sub	ostance, hazardous						
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when t	hev occurred.							
•		· -	•							
24.	Has any governmental unit notified you that yo	u may be liable or potentially liable t	under or in violation of an environmen	itai iaw?						
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any	release of hazardous material?								
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
26.	Have you been a party in any judicial or admini	strative proceeding under any envir	onmental law? Include settlements an	d orders.						
	■ No									
	☐ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case						
Par	11: Give Details About Your Business or Cor	·								
		-								
27.	Within 4 years before you filed for bankruptcy,	•	•	usiness?						
	☐ A sole proprietor or self-employed in a	trade, profession, or other activity, e	either full-time or part-time							
	☐ A member of a limited liability company	(LLC) or limited liability partnership	(LLP)							

Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Page 37 of 54 Document MERCADO, JOSE ANGEL RIVERA Case number (if known) Debtor 1 ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. Address (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. ☐ Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ JOSE ANGEL RIVERA MERCADO

Signature of Debtor 2

Signature of Debtor 1 Date Date January 10, 2020 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

JOSE ANGEL RIVERA MERCADO

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

### Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 38 of 54

Fill in this information to identify your case:					
Debtor 1	JOSE ANGEL RIVE	RA MERCADO			
Debtor 2 (Spouse, if filing)					
United States B	ankruptcy Court for the:	District of Puerto Rico, San Juan Division			
Case number (if known)					

	Check	as directed in lines 17 and 21:
		, ,
Statement:  1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).		
		2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
<ul> <li>1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).</li> <li>2. Disposable income is determined under 11</li> </ul>		

#### ☐ Check if this is an amended filing

#### Official Form 122C-1

# **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

page	s, write your name and case number (if known).								
Part	1: Calculate Your Average Monthly Income								
1.	What is your marital and filing status? Check on	e only	·.						
	■ Not married. Fill out Column A, lines 2-11.								
	☐ Married. Fill out both Columns A and B, lines 2:	-11.							
1. What is your marital and filling status? Check one only.  Not married. Fill out Column A, lines 2-11.  Married. Fill out both Columns A and B, lines 2-11.  Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.  Column A Debtor 1  Column B Debtor 2 or non-filling spouse  2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).  3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.  4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Do not include payments from a spouse. Do not include payments from a spouse. Do not include payments from a spouse. So not include	varied during the								
								Debtor 2 or	
2.		me, an	nd commissio	ons (be	fore all	\$	0.00	\$	
3.		ude pa	ayments from	a spou	ise if	\$	0.00	\$	
4.	of you or your dependents, including child supp from an unmarried partner, members of your housel roommates. Do not include payments from a spous	<b>port.</b> In hold, yo	nclude regula our dependent	r contrik ts, parer	outions nts, and	\$	0.00	\$	
5.		D	ebtor 1						
	Gross receipts (before all deductions)	\$	9,3	63.00	_				
	Ordinary and necessary operating expenses	-\$	-5,0	50.00					
	Net monthly income from a business, profession, or farm	\$	4,3	13.00	Copy here -> 3	\$	4,313.00	\$	
6.	Net income from rental and other real property	D	ebtor 1						
	Gross receipts (before all deductions)		\$ 0.00	_					
	Ordinary and necessary operating expenses		-\$ 0.00	_		Φ.	0.00	Φ.	
	Net monthly income from rental or other real prope	rtv	¢ 0.00	Cop	v here ->	<b>ው</b>	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

	MERCADO, JOSE ANGEL RIVER	Α		Case number	er ( <i>if known</i> )		
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
ı	terest, dividends, and royalties			\$	0.00	\$	
	nemployment compensation			\$	0.00	\$	_
5	o not enter the amount if you contend that the ocial Security Act. Instead, list it here:	amount received was a bene	fit under the				_
	For your spouse	\$	0.00				
	For your spouse	\$					
а	overnment in connection with a disability, commember of the uniformed services. If you reco	eived any retired pay paid und	der chapter				
ti ). <b>l</b> i v c	1 of title 10, then include that pay only to the endered pay to which you would otherwise be also 10 other than chapter 61 of that title.  Income from all other sources not listed about include any benefits received under the Sociation of a war crime, a crime against humanity compensation, pension, pay, annuity, or allower overnment in connection with a disability, compensation, in the connection with a disability, compensation, pension, with a disability, compensation.	entitled if retired under any properties. Specify the source and cial Security Act; payments rear, or international or domestic ince paid by the United States abat-related injury or disability	amount. Do aceived as a terrorism; or death of		0.00	\$	-
ti ). <b>l</b> i v c c	retired pay to which you would otherwise be a de 10 other than chapter 61 of that title. Accome from all other sources not listed ab out include any benefits received under the Soc ctim of a war crime, a crime against humanity compensation, pension, pay, annuity, or allowar	entitled if retired under any properties. Specify the source and cial Security Act; payments rear, or international or domestic ince paid by the United States abat-related injury or disability	amount. Do aceived as a terrorism; or death of	)	0.00	\$	-
ti ). <b>l</b> i v c c	retired pay to which you would otherwise be a de 10 other than chapter 61 of that title. Accome from all other sources not listed ab out include any benefits received under the Soc ctim of a war crime, a crime against humanity compensation, pension, pay, annuity, or allowar overnment in connection with a disability, com member of the uniformed services. If necessar	entitled if retired under any properties. Specify the source and cial Security Act; payments rear, or international or domestic ince paid by the United States abat-related injury or disability	amount. Do aceived as a terrorism; or death of	)	0.00	\$\$	-
ti D. <b>I</b> II V C	retired pay to which you would otherwise be a de 10 other than chapter 61 of that title. Accome from all other sources not listed ab out include any benefits received under the Soc ctim of a war crime, a crime against humanity compensation, pension, pay, annuity, or allowar overnment in connection with a disability, com member of the uniformed services. If necessar	entitled if retired under any properties. Specify the source and cial Security Act; payments rear, or international or domestic ince paid by the United States abat-related injury or disability	amount. Do aceived as a terrorism; or death of	)		\$\$ \$\$	-
ti ). <b>l</b> i v c c	retired pay to which you would otherwise be a de 10 other than chapter 61 of that title. Accome from all other sources not listed ab out include any benefits received under the Soc ctim of a war crime, a crime against humanity compensation, pension, pay, annuity, or allowar overnment in connection with a disability, com member of the uniformed services. If necessar	entitled if retired under any propose. Specify the source and cial Security Act; payments rear, or international or domestic nace paid by the United States abat-related injury or disability ary, list other sources on a se	amount. Do aceived as a terrorism; or death of	\$	0.00	\$	- - -
0. li 0. li r v 0. c 0. a a	retired pay to which you would otherwise be a de 10 other than chapter 61 of that title.  Icome from all other sources not listed about include any benefits received under the Sociation of a war crime, a crime against humanity compensation, pension, pay, annuity, or allowar overnment in connection with a disability, commember of the uniformed services. If necessand put the total below.	entitled if retired under any prove. Specify the source and cial Security Act; payments rety, or international or domestic ince paid by the United States abat-related injury or disability ary, list other sources on a set	amount. Do ceived as a terrorism; or death of parate page	\$ \$	0.00	\$ \$	- - - 4,313.00
ti ). In v c c c a	retired pay to which you would otherwise be alle 10 other than chapter 61 of that title.  Icome from all other sources not listed about include any benefits received under the Sociation of a war crime, a crime against humanity ompensation, pension, pay, annuity, or allowar overnment in connection with a disability, commember of the uniformed services. If necessand put the total below.  Total amounts from separate pages, if alculate your total average monthly incon	entitled if retired under any prove. Specify the source and cial Security Act; payments rety, or international or domestic ince paid by the United States abat-related injury or disability ary, list other sources on a set	amount. Do ceived as a terrorism; or death of parate page	\$ \$ \$	0.00 0.00 0.00	\$ \$ \$ =\$	- - - 4,313.00

- You are not married. Fill in 0 below.
- ☐ You are married and your spouse is filing with you. Fill in 0 below.
- $\hfill \square$  You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

	\$ \$ <b>+</b> \$		
Total	\$	0.00	],

14. Your current monthly income. Subtract line 13 from line 12.

15. Calculate your current monthly income for the year. Follow these steps:

15a. Copy line 14 here⇒

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

0.00

4,313.00

4,313.00

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Debtor 1	MERCADO, JOSE ANGEL RIVERA	Case number (if known)	
	Multiply line 15a by 12 (the number of months in a year).	-	<b>x</b> 12
15	o. The result is your current monthly income for the year for this part	of the form.	\$51,756.00

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Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (if known)

16	Calculate the median family income that applies to y	ou. Follow these steps:		
	16a. Fill in the state in which you live.	PR		
	16b. Fill in the number of people in your household.	1		
	16c. Fill in the median family income for your state and	size of household.		<sub>\$</sub> 24,261.00
	To find a list of applicable median income amounts		separate	*
17	instructions for this form. This list may also be available. How do the lines compare?	ble at the bankruptcy clerk's office.		
•	17a.  Line 15b is less than or equal to line 16c. C	on the top of page 1 of this form, check b	ox <b>Ω</b> isposable income is not	t determined under 11
	U.S.C. § 1325(b)(3). Go to Part 3. Do NOT			
	17b. Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calcu your current monthly income from line 14 ab	lation of Your Disposable Income (Off		_
Par	3: Calculate Your Commitment Period Under 11 to	J.S.C. § 1325(b)(4)		
18.	Copy your total average monthly income from line 1	I	<b></b> \$_	4,313.00
19.	that calculating the commitment period under 11 U.S.C. § income, copy the amount from line 13.	1325(b)(4) allows you to deduct part of you	our spouse's	
	19a. If the marital adjustment does not apply, fill in 0 on	line 19a.	<b>-</b> \$_	0.00
	19b. Subtract line 19a from line 18.			\$4,313.00
			L	
20.		·		. 4 313 00
	20a. Copy line 19b			\$4,313.00
	Multiply by 12 (the number of months in a year).			<b>x</b> 12
				\$ 51,756.00
	20b. The result is your current monthly income for the year	ar for this part of the form		\$ 51,756.00
	20c. Copy the median family income for your state and si.	ze of household from line 16c		\$ 24,261.00
	200. Copy the mediamanny moone for your state and si	to di riouscriola mornillia roc		
	21. How do the lines compare?			
	Line 20b is less than line 20c. Unless otherwis is 3 years. Go to Part 4.	e ordered by the court, on the top of page	1 of this form, check box 3,	The commitment period
	Line 20b is more than or equal to line 20c. Unle commitment period is 5 years. Go to Part 4.	ess otherwise ordered by the court, on the	top of page 1 of this form, cl	neck box 4, The
Des				
Par	Sign Below  By signing here, under penalty of perjury I declare that the	information on this statement and in any	attachments is true and corre	ect.
		The state of the s		
)	/s/ JOSE ANGEL RIVERA MERCADO JOSE ANGEL RIVERA MERCADO			
	Signature of Debtor 1			
	Date January 10, 2020 MM / DD / YYYY			
	If you checked 17a, do NOT fill out or file Form 122C-2.			
	If you checked 17b, fill out Form 122C-2 and file it with t	his form. On line 39 of that form, copy yo	our current monthly income f	rom line 14 above.

Fill in this information to identify you	ır case:	
Debtor 1 JOSE ANGEL RIVE	RA MERCADO	
Debtor 2 (Spouse, if filling)		
United States Bankruptcy Court for the:	District of Puerto Rico, San Juan Division	
Case number(if known)		☐ Check if this is an amended filing

Official Form 122C-2

#### **Chapter 13 Calculation of Your Disposable Income**

04/19

To fill out this form, you will need your completed copy of Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form, Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

Part 1:

Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C–1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122G-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

1 Living 0 Housing

**National Standards** 

You must use the IRS National Standards to answer the questions in lines 6-7.

6. **Food, clothing, and other items:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.

727.00

7. **Out-of-pocket health care allowance:** Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health car costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22.

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Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (if known)

People v			
	vho are under 65 years of age		
7a.	Out-of-pocket health care allowance per person	\$55_	
7b.	Number of people who are under 65	X <u>1</u>	
7c.	Subtotal. Multiply line 7a by line 7b.	\$55.00	Copy here=> \$55.00
eople v	who are 65 years of age or older		
7d.	Out-of-pocket health care allowance per person	\$114	
7e.	Number of people who are 65 or older	X <u> </u>	
7f.	Subtotal. Multiply line 7d by line 7e.	\$	Copy here=> \$
7g.	<b>Total.</b> Add line 7c and line 7f	\$	55.00 Copy total here=> \$ 55.00
ocal St	andards You must use the IRS Local Standards	o answer the questions in line	es 8-15.
	n information from the IRS, the U.S. Trustee Prog	ram has divided the IRS Loc	cal Standard for housing for bankruptcy
_ •	s into two parts:		
_	ing and utilities - Insurance and operating expen-	ses	
	ing and utilities - Mortgage or rent expenses	Dragram short Ta find the	short as suling using the link specified in the sensest
	rer the questions in lines 8-9, use the 0.5. Trusted ions for this form. This chart may also be availab		chart, go online using the link specified in the separat office.
	using and utilities - Insurance and operating expe dollar amount listed for your county for insurance and		eople you entered in line 5, fill in \$ 495.00
	using and utilities - Mortgage or rent expenses:	openating expenses.	
	Using the number of people you entered in line 5, listed for your county for mortgage or rent expenses		\$ <b>715.00</b>
9b.	Total average monthly payment for all mortgages an		home.
02.	To calculate the total average monthly payment, a contractually due to each secured creditor in the 60 bankruptcy. Next divide by 60.	dd all amounts that are	
	Name of the creditor	Average monthly	
		payment	
	-NONE-	\$	
	-NONE-  9b. Total average monthly paym	\$	Copy here=> -\$ Repeat this amount on line 33a.
9c.		\$	
9c.	9b. Total average monthly paym	sent \$ 0.00	
10. <b>If y</b> o	9b. Total average monthly paym  Net mortgage or rent expense.  Subtract line 9b (total average monthly paymen) from	sent \$ 0.00  om line 9a (mortgage or \$0.)  of the IRS Local Standard for	here=> -\$ 0.00 on line 33a.  \$ Copy here=> \$ 715.00 or housing is incorrect and

## Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 44 of 54

ebtor 1	MERCADO, JOSE ANGEL RIVERA		Case number (	if known)		
11.	Local transportation expenses: Check the number of veh	icles for which you claim ar	n ownership o	r operating ex	pense.	
	□ 0. Go to line 14.					
	■ 1. Go to line 12.					
	2 or more. Go to line 12.					
	Vehicle operation expense: Using the IRS Local Standar expenses, fill in the Operating Costs that apply for your Cen				e operating \$	237.00
13.	Vehicle ownership or lease expense: Using the IRS Loca may not claim the expense if you do not make any loan or leat two vehicles.	al Standards, calculate the r	net ownership	or lease expe		
Veh	Describe Vehicle 1:					
13a.	Ownership or leasing costs using IRS Local Standard		. \$	508.00		
13b.	Average monthly payment for all debts secured by Vehicle 1 Do not include costs for leased vehicles.					
	To calculate the average monthly payment here and on lin contractually due to each secured creditor in the 60 months Then divide by 60.					
	Name of each creditor for Vehicle 1	Average monthly payment				
	-NONE-	\$				
	Total Average Monthly Payment	\$0.00	Copy here =>	-\$	Repeat this amount on line 33b.	
13c.	Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if the numbert is less than	\$0, enter \$0	. \$	508.00	Copy net Vehicle 1 expense here => \$	508.00
Veh	nicle 2 Describe Vehicle 2:				_	
13d.	Ownership or leasing costs using IRS Local Standard		. \$	0.00		
13e.	Average monthly payment for all debts secured by Vehicle 2 leased vehicles.	. Do not include costs for				
	Name of each creditor for Vehicle 2	Average monthly payment				
		\$				
	Total average monthly payment	\$	Copy here => -\$	0.0	Repeat this amount on line 33c.	
13f.	Net Vehicle 2 ownership or lease expense				Copy net	
	Subtract line 13e from line 13d. if this number is less than	\$0, enter \$0	. \$	0.00	Vehicle 2 expense here => \$	0.00
	Public transportation expense: If you claimed 0 vehicle Public Transportation expense allowance regardless of				 he \$	0.00
	Additional public transportation expense: If you claimed deduct a public transportation expense, you may fill in what your than the IRS Local Standard for Public Transportation	you believe is the appropriat				0.00

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Debtor 1 MERCADO, JOSE ANGEL RIVERA Case number (if known)

Oth	er Necessary Expenses	In addition to the expense de the following IRS categories		listed above, ye	ou are allowed your monthly expenses for		
16.	self-employment taxes, socia	al security taxes, and Medica r, if you expect to receive a ta onthly amount that is withhel	re taxes. Y x refund,	ou may includ you must divid	cal taxes, such as income taxes, e the monthly amount withheld from your e the expected refund by 12 and subtract	\$	813.00
17.	Involuntary deductions: T union dues, and uniform co		ctions that	your job requi	res, such as retirement contributions,		
	Do not include amounts that	are not required by your job,	such as v	oluntary 401(k	) contributions or payroll savings.	\$	0.00
18.	together, include payments t	hat you make for your spouse life insurance on your deper	e's term lif	e insurance.	surance. If two married people are filing ouse's life insurance, or for any form of	\$	0.00
19.	<b>Court-ordered payments</b> : agency, such as spousal or	•	t you pay	as required by	the order of a court or administrative		
	Do not include payments or	past due obligations for spe	ousal or c	hild support. Y	ou will list these obligations in line 35.	\$	0.00
20.	Education: The total month  ■ as a condition for your job	, , , ,	ucation th	at is either requ	uired:		
	for your physically or mer	ntally challenged dependent o	hild if no p	oublic educatio	n is available for similar services.	\$	0.00
21.	<b>Childcare:</b> The total monthly Do not include payments for			•	ng, daycare, nursery, and preschool.	\$	0.00
22.		relfare of you or your dependently the amount that is more t	ents and the han the to	nat is not reimb tal entered in		\$	0.00
23.	you and your dependents, so service, to the extent necess is not reimbursed by your en	uch as pagers, call waiting, c ary for your health and welfa nployer. r basic home telephone, inte	aller identi re or that o ernet and o	fication, special of your depend cell phone ser	u pay for telecommunication services for all long distance, or business cell phone ents or for the production of income, if it vice. Do not include self-employment nt you previously deducted.	+\$	0.00
24.	Add all of the expenses al Add lines 6 through 23.	lowed under the IRS exper	se allowa	ances.		\$	3,550.00
Add	itional Expense Deductions	These are additional de	eductions	allowed by the	Means Test.		
		Note: Do not include a	ny expens	e allowances li	sted in lines 6-24.		
25.					es. The monthly expenses for health lecessary for yourself, your spouse, or you	ır	
	Health insurance		\$	0.00			
	Disability insurance		\$	0.00			
	Health savings account		+ \$	0.00	٦		
	Total		\$	0.00	Copy total here=>	\$	0.00
	Do you actually spend this to No. How much do you						
	Yes		\$				
26.	continue to pay for the reason	nable and necessary care an r immediate family who is un	d support able to pa	of an elderly, or y for such expe	actual monthly expenses that you will chronically ill, or disabled member of your enses. These expenses may include	\$	0.00
27.	Protection against family you and your family under th				es that you incur to maintain the safety of er federal laws that apply.		
	By law, the court must keep	the nature of these expenses	confident	iial.		\$	0.00

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ebtor 1	MERCADO, JOSE ANGEL RIVER	1	Cas	e number ( <i>if known</i>	)			
28.	Additional home energy costs. Your home	energy costs are include	– d in your insurance aı	nd operating exp	penses or	i line 8.		
	f you believe that you have home energy cos then fill in the excess amount of home energy	s that are more than the l						
	You must give your case trustee documentat claimed is reasonable and necessary.	on of your actual expense	es, and you must show	v that the additi	onal amou	unt	\$	0.00
	Education expenses for dependent childl \$170.83* per child) that you pay for your dep elementary or secondary school.					public		
	You must give your case trustee documentat reasonable and necessary and not already a		es, and you must expl	ain why the amo	ount claim	ed is		
,	Subject to adjustment on 4/01/22, and ever	3 years after that for cas	ses begun on or after	the date of adju	stment.		\$	0.0
1	Additional food and clothing expense. The chan the combined food and clothing allowares in the IRS	nces in the IRS National					f	
	To find a chart showing the maximum addition in form. This chart may also be available at			d in the separate	e instructi	ons for		
	You must show that the additional amount cla	imed is reasonable and n	ecessary.				\$	0.00
	Continuing charitable contributions. The nstruments to a religious or charitable organ			e form of cash	or financi	al		
	Do not include any amount more than 15%	of your gross monthly inc	come.				\$_	0.00
	Add all of the additional expense deducti Add lines 25 through 31.	ons.					\$	0.00
Dedu	ctions for Debt Payment							
00 <b>-</b>						_		
	or debts that are secured by an interest in other secured debt, fill in lines 33a thr		n, including nome m	ortgages, ven	icie ioan:	5,		
	o calculate the total average monthly paymer e 60 months after you file for bankruptcy. Th		e contractually due to	each secured o	reditor in			
	Mortgages on your home						Average paymen	e monthly t
33a.	Copy line 9b here					=>	\$	0.00
	Loans on your first two vehicles							
33b.	Copy line 13b here					=>	\$	0.00
33c.	Copy line 13e here					=>	\$	0.00
33d.	List other secured debts							
Name	of each creditor for other secured debt	Identify property that se	ecures the debt	inc	oes paym clude taxe insurance	S		
					No			
	-NONE-				Yes		\$	
							Ψ	
					No			
					Yes		\$	
					No			
						+	\$	
						1	<b>"</b> ==	
						Copy		
33e.	Total average monthly payment. Add lines	33a through 33d		\$	0.00	here=	>   \$	0.00

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ebtor 1	MERCADO, JOSE ANGEL	RIVERA		Cas	e numb	er (if known)			
	are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?								
	No. Go to line 35.  Yes. State any amount that you line 33, to keep possession 60 and fill in the informatior	of your property (called t							
Name o	of the creditor	Identify property that s	secures the deb	t	Total	cure amount		Monthly c	ure
-NONE-				\$		÷ 60 = \$			
				Total	\$	0.00	Copy total here=	s> \$	0.00
	you owe any priority claims - so past due as of the filing date of				ıt				
	No. Go to line 36.								
	Yes. Fill in the total amount of a priority claims, such as the		. Do not includ	e current or on	going				
	Total amount of all past-o	lue priority claims			\$	2.40	÷ 60	\$	0.04
36. <b>Pro</b> j	jected monthly Chapter 13 plan	payment			\$	762.96			
Offic Exe To fi	rent multiplier for your district as a control of the United States Courts (for cutive Office for United States Trund a list of district multipliers that incluance instructions for this form. This lis	r districts in Alabama an estees (for all other districtudes your district, go online	d North Carolinets). using the link spe	na) or by the	x	8.30			
Ave	rage monthly administrative expen	se			\$_	63.33	Copy tot here=>		63.33
	Id all of the deductions for debt	payment.						\$	63.37
Total D	eductions from Income								
38. <b>Add</b>	all of the allowed deductions.								
	ppy line 24, All of the expenses allopense allowances		\$	3,550.00	<u> </u>				
	ppy line 32, All of the additional exp			0.00	<u>)                                    </u>				
Co	ppy line 37, All of the deductions for	or debt payment	+\$	63.37	, 				
To	tal deductions		\$	3,613.37	,	Copy total here=>		\$	3,613.37

### Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 48 of 54

MERCADO, JOSE ANGEL RIVERA Debtor 1 Case number (if known) Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2) 39. Copy your total current monthly income from line 14 of Form 122C-1. Chapter 13 4.313.00 Statement of Your Current Monthly Income and Calculation of Commitment Period. 40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be 0.00 expended for such child. 41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 0.00 11 U.S.C. § 362(b)(19). 42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here 3.613.37 43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses. Describe the special circumstances Amount of expense Copy 0.00 0.00 **Total** here=>\$ Copy 3,613.37 3,613.37 44. Total adjustments. Add lines 40 through 43 here=> -\$ 699.63 45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39. Part 3: Change in Income or Expenses 46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase. Form Reason for change Increase or Line Date of change Amount of change decrease? ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease ☐ 122C-1 ☐ Increase □ 122C-2 ☐ Decrease ☐ Increase ☐ 122C-1 ☐ Decrease ■ 122C-2 ☐ 122C-1 ☐ Increase ☐ 122C-2 ☐ Decrease

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Debtor 1	MERCADO, JOSE ANGEL RIVERA	Case number (if known)
	•	
Part 4:	Sign Below	
E	By signing here, under penalty of perjury you declare that the information	n on this statement and in any attachments is true and correct.
X	/s/ JOSE ANGEL RIVERA MERCADO	
-	JOSE ANGEL RIVERA MERCADO	
	Signature of Debtor 1	
Date .	January 10, 2020	
	MM/DD/YYYY	

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case:20-00048-MCF13 Doc#:1 Filed:01/10/20 Entered:01/10/20 17:16:08 Desc: Main Document Page 54 of 54

B2030 (Form 2030) (12/15)

#### United States Bankruptcy Court District of Puerto Rico, San Juan Division

In re	MERCADO, JOSE ANGEL RIVERA		Case No.		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPI	ENSATION OF ATT	ORNEY FOR D	EBTOR	
(	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2010 compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankrupto	ey, or agreed to be paid	l to me, for services render	ed or to
	For legal services, I have agreed to accept		\$ <u></u>	4,000.00	
	Prior to the filing of this statement I have received			1,300.00	
	Balance Due			2,700.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compfirm.	pensation with any other perso	on unless they are men	nbers and associates of my	law
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national control of the same copy of the agreement.				irm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspe	ects of the bankruptcy	case, including:	
1	a. Analysis of the debtor's financial situation, and render. Description and filing of any petition, schedules, state. Representation of the debtor at the meeting of credited. [Other provisions as needed]	ement of affairs and plan whi	ch may be required;		ey;
<b>6.</b> ]	By agreement with the debtor(s), the above-disclosed fe	e does not include the followi	ing service:		
		CERTIFICATION			
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	y agreement or arrangement f	for payment to me for	representation of the debto	r(s) in
J	anuary 10, 2020	/s/ German A. R	ieckehoff		
Date		German A. Riec Signature of Attorn Lcdo German R	iey		
		273 URUGUAY S San Juan, PR 00 (787) 415-1453 grieckehoff@ya		APT 5A	
		Name of law firm		_	